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	ICATION FEE Effective Dece			RD	9/6	360	53		
CLAIMS AS FILED - PART I (Column 1) (Column 2)				SM/	LL ENTI		OTHER THAN		
FOR	NUMBER FILE	D NUMB	ER EXTRA	RAT	E F	E	RATE	FEE	
BASIC FEE					345	.00 OR		690.00	
TOTAL CLAIMS 13 minus 20-				X\$	9=	OR.	∴X\$18=		
INDEPENDENT CLAIMS U minus 3 = 1 /				ХЗ	-	OR	X78=	78	
MULTIPLE DEPENDENT CLAIM PRESENT					0=	ОŖ	-+260=	t	
• If the difference in column 1 is less than zero, enter "0" in column 2				TO	AL-	OR	TOTAL	768	
. 1/	AS AS AMENI	DED - PART I (Column		SM	ALL ENT	ITY OR	OTHER SMALL		
⋖	MAINING AFTER ENDMENT	HIGHES NUMBER PREVIOUS PAID FO	R PRESENT	RA	TE TIO	DI- NAL EE	RĀTE	ADDI- TIONAL FEE	
Total Independent	Minus	•ac		X\$	9=	- OR	X\$18==	-	
Independent • -	5 Minus		= 1	ХЗ	9=	OA	X78=	172	
FIRST PRESENTAT	10N.OF MULTIPLE	E DEPENDENT C	LAIM.	+13	IO= .	OR	+260=		
				ADDIT	OTAL	OR	TOTAL ADDIT. FEE	Pd.	
	olumn i)	(Column	2) (Column 3)		. F&& 3	••			
co P	CLAIMS EMAINING AFTER ENDMENT	HIGHES NUMBE PREVIOU PÀID FO	IT. PRESENT SLY EXTRA	RA	TE TK	ODI- ONAL EE	RATE	ADDI- TIONAL FEE	
Total Independent	" Minus	- a	-	Xs	9=	OF	X\$18=		
independent •			5 -	X	9-	OF	X78=	2	
FIRST PRESENTA	TION OF MULTIPL	E DEPENDENT C	ZAM						
				-3 . +1:	30-	. OF	+260=		
			•	1	OTAL		`L	, , , , , , , , , , , , , , , , , , ,	
- (0	:olumn 1)	(Column	•	ADDIT	OTAL		•		
U A	CLAIMS PARAMING AFTER JENDMENT	HIGHE NUMBE PREVIOU	n 2) (Column 3 ST ER PRESENT ISLY EXTRA	ADOIT	OTAL FEE AL		`L	ADDI- TIONAL FEE	
U	CLAIMS YES	HIGHE NUMBE PREVIOU PAID R	n 2) (Column 3 ST ER PRESENT ISLY EXTRA	ADD!	OTAL FEE AL	OF DDI- DNAL	ADDIT. FEE	ADDI- TIONAL	
O LNEW AM AM Total	CLAIMS EMAINING AFTER MENDMENT Minus Minus	HIGHE NUMBE PREVIOU PAID FO	n 2) (Column 3 ST ER PRESENT BSLY DR	ADOT	OTAL FEE AI	OF DDI- DNAL EE	RATE X\$18=	ADDI- TIONAL	
NDMENT C	CLAIMS EMAINING AFTER MENDMENT Minus Minus	HIGHE NUMBE PREVIOU PAID FO	n 2) (Column 3 ST ER PRESENT BSLY DR	ADDIT	OTAL FEE AI TIC F	OF ONAL EEE OF	RATE X\$18= X78=	ADDI- TIONAL	
O LANGUAGE AND TOTAL OF THE PROPERTY OF THE PR	CLAIMS EMAINING AFTER JENDMENT Minus Minus ATTON OF MULTIPE	HIGHE NUMBE PREVIOL PAID R * * * * * * * * * * * * *	(Column 3 TER PRESENT EXTRA PRESENT EXTRA CLAIM	A001	FEE AL	OF DDI- DNAL EE	RATE X\$18= X78= +260=	ADDI- TIONAL FEE	

Application or Docket Number